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PATENT  
Attorney Docket No.: 020375-003100US

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

On July 13, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: Bonnie Larson

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JUL 22 2004

**GROUP 3600****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Missy L. Villapudua

Application No.: 10/027,696

Filed: December 20, 2001

For: CUSTOMER PRIVACY  
PROTECTION SYSTEMS AND  
METHODS

Customer No.: 20350

Confirmation No.

Examiner: Woo, Richard Sukyoon

Technology Center/Art Unit: 3629

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed May 19, 2004, please enter the following amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 5 of this paper.



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GROUP 3600

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/027,696
	Filing Date	December 20, 2001
	First Named Inventor	Villapudua, Missy L.
	Art Unit	3629
	Examiner Name	Woo, Richard Sukyoon
Total Number of Pages in This Submission	Attorney Docket Number	020375-003100US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm or Individual name	Townsend and Townsend and Crew LLP Darin J. Gibby Reg. No. 38,464	
Signature		
Date	July 13, 2004	

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Typed or printed name	Connie Larson		
Signature	Connie Larson	Date	July 13, 2004